Chronically ill Arabic-speaking patients' experiences of communication with the authorities and healthcare staff during the COVID-19 pandemic: a qualitative study

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BACKGROUND AND AIM

- During the COVID-19 pandemic, Denmark experienced a higher incidence of infections and hospitalizations among non-western migrants.
- However, the Danish health authorities and health professionals seemed challenged in establishing and maintaining relations to non-western migrants living with multiple illnesses.
- This study's aim was to explore non-western migrants' relations to Danish health authorities and health professionals as well as their sense of belonging in Denmark.

METHODOLOGY

- 11 semi-structured interviews were conducted 2021-2022, in-situ, face-to-face and in Arabic.
- Non-western migrants living with multiple chronic illnesses in the process of assessment or in treatment for co-morbidities, i.e., diabetes and post-traumatic stress disorder acquired before or during migration.
- The empirical knowledge was analyzed using a thematic network analysis approach.

FINDINGS

- Non-western migrants living with multiple chronic illnesses encounter several system barriers to access health and healthcare in the Danish health system. This is particularly visible when studying processes of medical assessment and treatment among non-western migrants, who are living with co-morbidities.
- The COVID-19 pandemic exposed or re-enforced existing barriers inherent to the Danish health system.
- The quality of patients' relations with health professionals has made it possible to establish bridge to support these patients and address their needs for prevention and treatment of COVID-19.

IMPLICATIONS

The study's findings raise important issues, such as:

- To which extent, did non-western migrants experience marginalization during the pandemic?
- Did the COVID-19 pandemic accelerate processes leading to inequalities in access to health and healthcare among non-western migrants? For instance, where, when and how do non-western migrants living with multiple illnesses, experience their relations to Danish health authorities and health professionals' as inclusive or as marginalizing.
- How does these experiences of non-western migrants' relations to Danish health authorities and health professionals shape their sense of belonging and vice-versa?

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